

### THE 5 DIRTY TRICKS Used by Car Insurance Companies (Using real private emails)

We've heard all the reasons why people sometimes choose <u>not to hire</u> an injury lawyer:

- "I didn't want to make it a big deal."
- "I thought I could handle it on my own."
- "I wanted to avoid paying an attorney's fee from the case."
- "It's not about the money," and "I'm not that type of person."

However you decide to handle your injury claim, or whatever your motives, it boils down to <u>BEING TREATED FAIRLY</u>. After reading the following information, you'll have serious doubts about whether you'll be treated (or paid) fairly by an insurance company without the help of an <u>experienced personal injury attorney</u>.



We were recently contacted by a person hit by a car while walking to work. He was kind enough to allow us to use his personal experience with the insurance company to hopefully allow you to avoid <u>falling for some common insurance tricks</u>. His only regret was not calling us sooner.

In this case, the at-fault driver's insurance company *immediately admitted fault*, leaving the Client with a *false sense* that he would be treated fairly. He attempted to handle the case on his own until he reached out to us <u>after</u>

<u>receiving these e-mails from the insurance company:</u>

Good morning,

This is a follow up of our conversation this morning regarding settlement of your injury claim. I have confirmed that, of the incurred bill of \$22,506 at Sentara, \$17,717 was written off after payment of \$3702 by BCBS and that there was a remaining balance to you of \$1086. Of the \$937 for the radiology bill, \$436 was paid and the rest written off. There should be a separate bill for the emergency room doctor and I do not have the bill, but have projected an additional \$750 for that, along with the \$586 for the ambulance.

We have offered \$9,000 for settlement of your injury claim. Please feel free to give me a call at your convenience with any questions or concerns you may have.

Thanks.

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### DIRTY TRICK #1:

### THE INSURANCE COMPANY WILL OFFER TO PAY ONLY YOUR COPAYS INSTEAD OF THE FULL BILL.



In Virginia, You are entitled to payment for <u>all reasonable medical bills</u> <u>incurred.</u> This means you are entitled to payment for the <u>actual charge</u> made by the hospital or healthcare provider. Our Client had a <u>\$22,506</u> emergency room bill, but the insurance company is offering to pay only <u>\$3,702!</u>

F A C T

The insurance company should have to pay the entire \$22,506 bill, and should not attempt to benefit from the fact that you have health insurance.

We are aware of at least one instance in which an insurance company made a lowball offer and actually had the nerve to ask the injured person **to ask his own doctors to lower their bills so it could get off cheaper.** 

Insistence upon full payment of this single bill alone is <u>2.5x larger</u> than the entire settlement offer made by the insurance company! An experienced personal injury lawyer will insist upon *full payment of the bill*, and most insurance companies don't even attempt this dirty trick on lawyers.

Don't be fooled by the polite tone of the e-mail. The insurance company's goal is to *pay you as little as possible*.

There's more! After the Client asked for clarification, the at-fault driver's insurance company sent another e-mail:



Good morning, \_\_\_\_\_\_\_ The full amount of \$9,000 is coming to you. Whether or not your health insurance carrier comes back to you for reimbursement of what they paid out, I cannot answer. It appears that at six months post accident, they would have notified you. That said, the most they will ask is what they paid out, which is \$3702.25 for the ER and \$348.82 for the radiology bill. I did not receive the ER doctor's bill but projected \$750 for that bill and your insurance would have paid a portion of that. I hope I have answered your questions to your satisfaction, but if not, please feel free to give me a call. Thanks.

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### DIRTY TRICK #2:

### THE INSURANCE COMPANY WANTS TO BE DONE WITH YOU AND CAN'T BE BOTHERED TO WORRY ABOUT YOUR FUTURE HEADACHES.

The insurance company is dangling a <u>\$9,000 settlement offer</u> in front him by telling him that it is "coming to you," which is technically true in that a \$9,000 check will be mailed to him in exchange for a full release (i.e., the case is closed forever and the car insurance company will **never pay you more.**)

The \$9,000 may, however, <u>not entirely belong to the Client</u>. Some health insurance plans are entitled to be repaid out of personal injury settlements. The insurance company is careful to mention that the Client's health insurance company could request payment of <u>\$4,801.07 after-the-fact</u>. If the health insurance is owed part of the settlement, then suddenly that \$9,000 settlement is more than *cut in half*, which is apparently of no concern to the car insurance company.



The car insurance company is careful to admit that it does not know if the Client's health insurance has a right to repayment from the settlement,

but shamefully nudges him toward accepting the settlement by suggesting that "they would have notified you" by now since six months have passed since the accident happened. This is simply not true, and the suggestion otherwise is simply dishonest.

It is true that some health insurances are not entitled to reimbursement, and sometimes a health insurance plan that is entitled to repayment never seeks it. However, health insurance plans have ways to learn about settlements and may contact you long after an accident and insist upon immediate payment.

F A C T The <u>safest and best practice</u> is to have an experienced personal injury law firm <u>proactively contact your health insurance</u> <u>company to determine if it has reimbursement or subrogation rights.</u> If there are no reimbursement rights, then you will have peace of mind in knowing that you won't get a big bill after-the-fact. If your health insurance does have reimbursement rights, then it can be <u>handled on the front end</u>, and the amount owed <u>sometimes negotiated</u> to allow you to pocket a larger portion of the settlement.

### DIRTY TRICK #3:

# THE INSURANCE COMPANY "ADMITTING FAULT" OR "ACCEPTING LIABILITY" DOES NOT MEAN YOU'LL BE PAID FAIRLY.

I'm sure you now have a flavor for this after the first two tricks. The insurance company "admitting fault" or "accepting liability" does not mean you will be paid fairly. It simply means that for the purposes of settlement discussion, the insurance company is not disputing fault (or arguing you share fault). They will still attempt to negotiate as low of a settlement as you will allow. Also, they can change their mind at any time, and often do, especially if a lawsuit is filed.

### DIRTY TRICK #4:

# IF YOU HAPPEN TO BE DEALING WITH YOUR OWN INSURANCE COMPANY, IT DOESN'T MEAN YOU WILL BE TREATED MORE FAIRLY.



Sometimes, coincidently, the at-fault driver happens to have the same insurance company as you. There are also occasions where an uninsured motorist injures you, so you'll have to negotiate with your own insurance company for payment under your uninsured motorist coverage. Don't be lulled into thinking you will be taken care of simply because you are a loyal customer of the company and always make your payments on time. Your own insurance company will fight you just as hard as anyone else to pay you as little as possible.

### DIRTY TRICK #5:

### RADIO SILENCE AND DELAY AS DEADLINES APPROACH

In Virginia, the deadline to file a personal injury lawsuit is typically <u>2 years</u> from the date of the accident. Often, someone injured in an accident thinks he has plenty of time to attempt to handle the case himself. He thinks if he gets lowballed, then he can always hire a lawyer later. He feels confident because the insurance adjuster seemed sympathetic, caring, and "accepted responsibility."

It is not uncommon for our law firm to receive calls from people <u>20+ months</u> <u>after the accident</u> panicked that they can't get the insurance company to call them back. Or upset that they waited all this time just to have the insurance company request <u>5 years of pre-accident medical records</u>, so it can argue that your problems are from a pre-existing condition.

If you've reached this late state without an attorney, then the insurance company has all the leverage.



Some lawyers are often hesitant to undertake an injury case very close to the deadline to file a lawsuit, and insurance companies know this. An insurance company can then offer you an unfair settlement. Without a lawyer involved, you are simply not viewed as a legitimate threat to file a lawsuit to insist upon fair payment.

At the end of the case, our Client, who was kind enough to share his e-mails with you, ended up with more money, avoided additional aggravation, and slept easier knowing the case was handled properly.

His only regret was not involving our firm sooner.

We forced the insurance company to treat him fairly.

These are just a few examples of dirty tricks insurance companies use to avoid paying unrepresented people fairly. These techniques are how they continue to take advantage of people for profit. While every case is different, and not all cases necessarily require the help of an experienced personal injury lawyer, we encourage you to contact us for a free consultation. Don't let the insurance company take advantage of you.

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